Print neatly. Use dark ink.
You may want to write your answers on scratch paper and then transfer them

IN THE IOWA DISTRICT COURT FO		COUNTY
(name	of the county where you are filing t	his petition)
	·	
	: : Civil No.	
Plaintiff,	: (leave blank - Clerk o	f Court will fill in)
(parent or guardian of	:	,
person desiring domestic	:	
abuse protective order) on behalf of child/ward	:	
on bendin of offine, ward	:	
(person desiring domestic abuse order)	: PETITION	
	:	ON 4
VS.	: FOR RELIEF FROM:	JIVI
	: DOMESTIC ABU	SE
	: :	
Defendant.	:	
(alleged domestic abuser)	:	Code Ch. 236
	•	
The Plaintiff states:		
1. This action is being filed under lowa Code cha	apter 236.	
My child/ward now lives in	County, Iowa.	
3. My child/ward is years of age.		
4a. I (Plaintiff) can receive mail at the following a	iddress:	
Number, Street City, State	Zip Code	County
4b. My child/ward can receive mail at the following		-
may be used: your mailing address, the mailing		• , ,
or private post office box, any other mailing addr	ess, with permission of the r	esident of that
address)		
Number, Street City, State	Zip Code	County
5a. Defendant lives at the following address <i>(if k</i>	nown):	
Number, Street City, State	Zip Code	County
5b. Defendant works at the following (if known):	Employer	
	Етроуот	
Number, Street City, State 6. Is defendant 17 years of age or younger (if kn	own)? No Yes	County

	7	ge of each child u	nder age 18 wh	ose welfare may be affected by the	
contro	•	Distributo	Nama	Distribute	
	Name	Birthdate 	Name —————	Birthdate	
8. Rela	ationship of plainti	 ff and defendant	at the time of the	e abuse or threat of abuse:	
(mark	only one box)				
	[] Married		[] Lived toge	ether within one year	
	[] Separated		of the ass	ault, but not at the	
[] Divorced			time of the assault		
	[] Parents of the	same minor	[] Intimate re	elationship*	
	(under 18) chi	ld or children	[] Have bee	n in an intimate relationship	
	[] Living togethe	er	and have of the ass	had contact within one year ault *	
this fo	involvement. An inti business or profession. E: If none of these	mate relationship doe onal capacity. e boxes accurat attorney and/or o	es not include casua ely describes y call the police a	al social relationships or associations in a vour relationship, do not complete about your abuse.)	
9. Mali	-	s physically abuse.	•		
	= =		•		
	= =	s sexually abused s threatened her/l	-	fears for her/his physical safety	
when y	l experience, and/ your child/ward we	or threats. Please ere hurt or threate on and able to wr	e include <u>how</u> it ened: <i>(Please no</i>	ual (against the will of your child/ward) happened, where it happened, and ote: If child/ward is present at the also describe recent injuries or threats	
		-	•	rd has received from the defendant. t happened and <u>when</u> it happened:	

If your child/ward and defendant have no children in common (biological or adopted)

Mark this box [] if additional 8 ½ x 11 sheets are attached.

Jurisdiction Act and to the court's duty under Iowa Code § 236.5(2)(d) (1993). If you are unsure how to answer these questions, contact a lawyer for advice. 11. Who should have temporary custody of the minor children your child/ward has in common with the defendant? My child/ward ___ Defendant ___ Other (please specify) _____ 12. How will the safety of your child/ward and their children be affected by the court's decision about temporary custody or temporary visitation? (please explain) 13. If your child/ward wants custody of the children in common, provide suggestions for how the defendant could visit the children without contacting your child/ward -- for example, through friends, relatives, or baby-sitters. List concerns you have about visitation: 14. List the minor children (under age 18) your child/ward has in common with the defendant (your grandchildren). (Give each child's name, address and birthdate. If children are living in a shelter or other safe place, give only the county and state where they are living.) Present Address (or county/state) Name 15. If your grandchildren have lived with people other than your child/ward or the defendant during the last five years, list those other persons and places: Grandchild's name Person(s) grandchild lived with Address at that time From when to when (Attach additional sheets if necessary to account for each child's living situations over the last five years.) 16. Give the present address of each adult listed in question 15, above: Person(s) child lived with (other than you) Present Address 17. Has there ever been any court case concerning custody of your grandchildren that your child/ward has in common with the defendant in Iowa or any other state? No ____ Yes ___ (If "Yes", explain: 18. Do you (plaintiff) know of any other person who has physical custody of the minor children (your grandchildren) or

under age 18, skip questions 11 through 18. Questions 11-18 relate to the Uniform Child-Custody

Mark this box [] if additional 8 ½ x 11 sheets are attached.

(If "Yes", explain:

claims to have custody or visitation rights with respect to the children? No ____ Yes ____

You can get two kinds of orders. A short-term order lasts until a hearing is held (within 15 days). A long-term order lasts up to one year, and is issued only after a full hearing. You can ask for either or both types of orders.

I AM ASKING THE COURT TO DO THE FOLLOWING: [] I REQUEST THAT THE JUDGE immediately issue an EMERGENCY and/or a TEMPORARY Protective Order(s) to protect my child/ward before the hearing because she/he is in present danger of domestic abuse. I request that the judge order the defendant to: (mark all that apply) [] stop domestic abuse [] stay away from my child/ward at home/the family home [] stay away from my child/ward at work or school [] not contact my child/ward either personally or through another person, whether by telephone, writing or any other way. [] give my child/ward temporary possession of the family home or provide other housing [] give my child/ward temporary possession of the family car (specify make, model, year, if known [] give my child/ward temporary custody of the grandchildren, with appropriate visitation for defendant [] give my child/ward temporary financial support [] other (please specify): [] I REQUEST THAT THE JUDGE set a hearing on this Petition; direct the Sheriff to serve the defendant a copy of this Petition along with a copy of the Order for Hearing; and, following the hearing, issue a Protective Order (effective for up to one year). I request that the judge order the sheriff to serve the defendant with a copy of any Protective Order issued. I request that the judge grant any relief authorized by law, including ordering the defendant to: (mark all that apply) [] stop domestic abuse [] stay away from my child/ward at home/the family home [] stay away from my child/ward at work or school [] not contact my child/ward either personally or through another person, whether by telephone, writing or any other way. [] give my child/ward possession of the family home or provide other housing [] give my child/ward possession of the family car (specify make, model, year, if known _____ [] give my child/ward temporary custody of their children, with appropriate visitation for defendant [] give my child/ward financial support [] take part in counseling

IF YOU CHANGE YOUR MIND about any of these requests made on behalf of your child/ward, you must tell this to the judge at the hearing which you will have five to fifteen days after you file this petition. You may cancel any of the requests you make in this Petition. You may also ask the judge to grant you any of the requests even if you did not mark them on this Petition.

[] other (please specify): ____

READ BEFORE SIGNING. When you file this Petition you are setting into motion several legal matters. Please check each statement below after you have read it:

 I understand that there will be a court hearing five to fifteen days after I file this Petition.
 I understand that a law enforcement officer will give the defendant a copy of this Petition, if the defendant can be found, and that the defendant will receive other relevant court papers.
 I understand that I <u>must</u> attend the hearing. If I change my mind and do not want a Protective Order on behalf of my child/ward, I should fill out and file with the clerk of court a "MOTION TO DISMISS" <u>before</u> the scheduled hearing. <i>[This form can be picked up at the Clerk of Court's Office.]</i> If you do not attend the hearing, or file a "Motion to Dismiss," the judge could allow the defendant to present testimony and might give the defendant what he/she asks for, such as custody of your grandchildren or the home. If you file a motion to dismiss, the judge can dismiss the Temporary Protective Order so that it will no longer have any effect.
 I understand that the hearing is my opportunity to tell the judge how my child/ward was hurt or threatened, where it happened and when it happened. I can bring my child/ward in to testify regarding the abuse. I can bring people with me to the hearing who saw the defendant abusing my child/ward or who saw the injuries. I can bring any evidence that I have which shows that my child/ward has been abused, such as medical reports, pictures, pulled hair, or anything else that might help convince the judge that my child/ward needs a Protective Order.
 I understand that the court will give primary consideration to the safety of my child/ward and her/his children. I should tell the judge how they will be in danger if the defendant is given temporary custody or unrestricted visitation.
 I understand that the hearing is my opportunity to tell the judge if paying court costs would hurt my ability to pay for my needs or my children's needs. I should be ready to provide financial information at the hearing, such as income and living expenses and other expenses.
 I understand that the Protective Order could be in effect for up to <u>one year</u> . I also understand that if the Protective Order is granted, it may be extended beyond one year by filing for an extension <u>prior</u> to the expiration of the Order.
 I understand that if I believe that the Protective Order has been violated, I can bring this to the court's attention by filling out and filing with the clerk of court an "AFFIDAVIT TO START CONTEMPT PROCEEDINGS." [This form can be picked up at the Clerk of Court's Office.]
 I understand that if a Protective Order is issued, peace officers can use every reasonable means to enforce the Protective Order, including taking the defendant into immediate custody, and that if a court finds that the defendant has violated the Protective Order, the defendant could be put in jail and have to pay a fine. I also understand that my child/ward could be arrested and jailed for aiding and abetting defendant's violation of the protective order.
 I understand that a Protective Order is a serious legal action. If I want to change any part of the Protective Order, I should go back and tell the judge. I should fill out and file with the clerk of court a "REQUEST TO CANCEL OR CHANGE A CHAPTER 236 PROTECTIVE ORDER." I This form can be picked up at the Clerk of Court's Office I

IMPORTANT CONFIDENTIAL NOTICE

you would like all or part of this file to remain confidential to the general public in order to protect the safety or privacy of any person, then you must request the court to seal all or part of this file.* The person from whom you are seeking relief will have access to the file, even if it is sealed. Mark one or more of the following if you want this file sealed: [] I request all portions of this file to be sealed. [] I request that my county of residence and mailing address be sealed. I request that the names and addresses of my children/grandchildren be sealed. [] Other request: (please specify): [] * Court orders and support payment records cannot be sealed. The court may, upon request, order that address and location information be redacted from those records. STATE OF IOWA) ss: [name of county where Notary Public is located] , the plaintiff named above, have read the above Petition and the information provided is true and accurate to the best of my knowledge. PLAINTIFF [Sign only in front of a Notary Public] Subscribed and sworn to before me this ______ day of ______, 20 ____. Notary Public (Please note: The following space for the child/ward's description and signature is not required to file the petition, but merely provides information for the judge.) I, ______, consent to my parent/guardian filing this petition on my behalf. The following is my description of injuries or threats I have received from the defendant: CHILD/WARD [Sign only in front of a Notary Public] Subscribed and sworn to before me this ______ day of _______, 20 _____.

Pursuant to lowa Code section 236.10, this file is a public record and accessible by anyone. If

Notary Public

YOU MAY WANT TO OR SHOULD SEE A LAWYER

if you don't know how to answer the questions on this Petition

if you think the defendant will hire a lawyer

if you think the defendant will try to get custody of the children You are allowed to involve a lawyer in this process at any time, though you are not

A booklet entitled "How to Protect Yourself from Domestic Abuse Without a Lawyer" is available online at www.judicial.state.ia.us. It explains court procedure and gives information about how to contact a lawyer.

FOR OTHER GENERAL INFORMATION ABOUT DOMESTIC ABUSE, CALL THE (CONFIDENTIAL) IOWA DOMESTIC ABUSE HOTLINE: 1-800-942-0333